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THE CHURCH'S ATTITUDE TOWARDS MENTAL HEALING

BY W. A. PURINGTON.

THE initial success of all erratic religious movements may be traced in almost every instance to a belief, more or less substantiated, that extraordinary cures of physical maladies have followed, or have been wrought by, the ministrations of their teachers. Such a belief, finding lodgment in the thought of even educated and otherwise intelligent persons, has sufficed to make them enthusiastic disciples of charlatans, whose forthgivings they would have rejected, save for this delusion, with ridicule and contempt.*

It is not proposed to discuss here the likenesses and differences between the various systems of curing the sick in our own day by so-called mental healing, metaphysical healing, faith cure, new-thought, Mormonism; by the methods of Quimby, Eddy, Mix, Simpson, Barnes, the Mountain Evangelist, Matthews,—who call-

* Macaulay puts this admirably, in his review of Ranke's "History of the Popes," referring to Joanna Southcott, the Devonshire kitchen wench, who gathered a following of over 100,000 and established a sect still extant in 1889:

"A very common knowledge of history, a very little observation of life, will suffice to prove that no learning, no sagacity, affords a security against the greatest errors on subjects relating to the invisible world. . . . For these reasons we have ceased to wonder at any vagaries of superstition. We have seen men, not of mean intelligence or neglected education, but qualified by their talents and acquirements to attain eminence either in active or speculative pursuits, well-read scholars, expert logicians, keen observers of life and manners, prophesying, interpreting, talking unknown tongues, working miraculous cures, coming down with messages from God to the House of Commons. We have seen an old woman, with no talents beyond the cunning of a fortune-teller, and with the education of a scullion, exalted into a prophetess, and surrounded by tens of thousands of devoted followers, many of whom were, in station and knowledge, immeasurably her superiors; and all this in the nineteenth century; and all this in London." History repeats itself, and we heed its voice no more than Trojans heeded Cassandra's.

ed himself Matthias and persuaded the good people of White Plains that if he were not released from jail that town would sink below the surface,—Schlatter, Dowie and the host of others who have had temporary success, a greater or less following and even, like Joanna Southcott and Joseph Smith, a survival of their doctrines for a while after their deaths. It is sufficient to say that they agree generally in denying the efficiency of medical treatment and substituting for it a belief in a religious theory, or an idea of health for that of sickness, or a theory of matter's unreality, or an erasure from the brain of subconscious pictures of ancient terror to which is traceable all physical disease, or a blending of these treatments.

Let it be admitted, for argument's sake at least, that in the teachings of all healers, self-deluded or conscious charlatans, there has been and is an element of truth, a causation not fully apprehended by them. Also let the following concessions be made:

(1) The influence of mind on body, and *vice versa*, is great; and, although always recognized by physicians, is yet far from being fully understood and reduced to formulated laws.

Dr. Osler concluded a review of medical progress in the nineteenth century by saying frankly that, other things being equal, the best practitioner is he who inspires most courage in the patient and radiates most hope in the sick-room. So, too, thought Montaigne, whose diatribes against physicians of his day and confidence in Horace's prescription, "*æquam memento servare mentem*," would vastly please the run of mental healers were they familiar with his arsenal. He said of medical men, whose aid he nevertheless called in:

"It was a good rule in their art, and that accompanies all other vain, fantastic and supernatural arts, that the patients' belief should prepossess them with good hope and assurance of their effects and operation; a rule they hold to that degree as to maintain that the most inexpert and ignorant physician is more proper for a patient that has confidence in him, than the most learned and experienced that he has not acquaintance with. . . . I need nothing extraordinary when I am sick. I will not be beholden to my Bolus to do that for me which nature cannot; at the very beginning of my fevers and sicknesses that cast me down, whilst intire, and but a little disorder in my health, I reconcile myself to Almighty God by the last Christian offices, and find myself by doing so less oppressed and more easy, and have got, methinks, so much the better of my disease."

(2) During recent years, knowledge of the brain's structure

and functions has widened. Neurology has made advances; nevertheless, differential diagnoses of nervous diseases are still difficult and far from being invariably certain, dogmatism and certainty being somewhat different. The line between functional and organic neuroses is not in practice to be drawn offhand, even by specialists. A late writer says: "Many of the minor symptoms of nervous disease and the more exact and elaborate methods employed in their diagnosis are unknown even to the average physician."

(3) It has been noticed, almost from immemorial time, that strong mental suggestion, fright, shock, imagination, hope, fear, superstition, faith and credulity, even so slight a thing as the presence of "the harmless necessary cat," are followed by marked and often astounding physical and psychical results, the chain of whose causation, physiological and psychological, cannot be certainly traced. Nor have these *sequelæ* been reduced in all cases to such a succession of cause and effect as to indicate unvarying laws and certainty of treatment. The same results have followed the vaticination of oracles, the curses of Voodoo queens, the laying on of royal hands, as well as the prayers and encouragement of priests, Pagan and Christian.

(4) The function of any priesthood embraces, within due limitations, ministering to the body as well as to the soul, feeding the hungry, comforting the bowed down, cheering the sick, and doing these things in such wise as to render unto Cæsar the things that are Cæsar's—obeying, that is to say, the laws of the State.

(5) It is a physician's duty to prove all things, so far as practicable; to widen observation and to practise what is believed to be true; bearing in mind that departure from approved methods, unjustified by the circumstances of the case, may subject him to liability for malpractice in case of ill-success, yet remembering that, as has been well said, all science is a voyage of exploration, that some must have courage, and that refusal to examine and, if approved, to adopt new theories is uncourageous and unscientific.

(6) Finally, there is abundance of Scriptural texts approving treatment of the sick by ministers of religion. More or less perverted, they have been cried from the house-tops by the Southcotts, Smiths, Eddys, Dowies, *et id omne genus*. In primitive times, priest and physician, both Pagan and Christian, were one.

Temples were healing shrines. Under the Apostolic canons every church or congregation had a ministry of three women called "widows," two of whom persevered in prayer for the tempted. The other attended women in sickness; one of her qualifications being that she should not be given to much love of wine, so as to be sober and capable of performing the night service. From the tenth to the twelfth centuries the practice of physic and surgery was almost entirely carried on by the monks and clergy. Under Henry VIII, the Bishop of London and Dean of St. Paul's, with four of the faculty, were the medical examiners and licensers within a radius of seven miles of London; while, outside that mystic circle, the Bishop of the Diocese or his Vicar-General, with such of the faculty as he chose to call in, examined and licensed candidates.

The foregoing concessions are thus removed from argument; nor will it be contended that the church of to-day should take no part in caring for the sick. On the contrary, the maintenance of hospitals under church auspices is legitimate and laudable. That priest and pastor should visit and receive visits from the sick, and with discretion comfort them, is not to be disputed. The mental rest and solace of the penitent in the confessional, of the parishioner after counsel from minister or rector, are great and within the church's province to administer.

Indeed, the pastor's spiritual influence over the lives of the flock might be made with advantage, in the exercise of due discretion, greater than it is. There is a society of physicians and laymen in New York City, with branches throughout the country and allied associations in foreign lands, the American Society of Sanitary and Moral Prophylaxis, whose hope and aim are to find methods which, without sensationalism, shock to pudicity or harmful suggestion to innocence, may arrest measurably the spread of those diseases originating in vice that are said by eminent medical men to be a greater menace, a greater source of woes unnumbered, to the innocent than all others, not excluding tuberculosis. It was something of a revelation to Protestant members of this organization to hear from two fellow members belonging to the Society of Jesus to what extent their church, in its retreats, missions and societies or sodalities, seeks by discreet instruction and emphasis upon the need of pure living to safeguard the flock from evils that are veritable scourges of God—against which, more-

over, right living, in which the clergy are directly interested, is the one certain prophylaxis. In this regard the Protestant communions seem less careful than that of the older church.

There is, too, a narrow field for what is called "pastoral medicine," which has nothing to do with mental or psychical healing, but contemplates the acquisition of such knowledge by the priest as will enable him to recognize the approach of dissolution and be prepared to administer the sacrament, and also to give the prophylactic advice last referred to, and be helpful in emergencies; but it by no means includes or contemplates anything like general or extended practice in any class of diseases. Such healing as is said to take place at special shrines, as at Lourdes, is a matter apart: and such healing is attributed by that church directly to divine interposition.

The attitude of the Protestant Church in our day to the various systems of healing already referred to has been one, if not of avowed discouragement, at least of abstinence from participating in or countenancing them. Putting aside, therefore, discussion of those systems, we come to consider the only method of systematically treating the sick for their cure by Protestant clergymen, on behalf of which there seems to be any disposition among men of light and leading to enlist the church's authority.

The American Emmanuel Movement is, of course, referred to. It differs radically from every system above noticed. Its clerical leaders are men of standing, of learning, sincerity, faith and cognizance of history's lessons. They are students of what has come to be called Psychotherapy. They have associated with them prominent physicians. They expressly disavow the contention that disease is only mental illusion and admit that it is due to physical causes and amenable to treatment by medicines and operative procedure; and, although they are hopefully awaiting proof of the cure of organic lesions by psychical processes, they at present propose to accept no cases of organic disease until after the patient's examination and a diagnosis of his case by competent medical men. Their treatment would seem to consist of conversation, counsel, suggestion, to some extent of hypnosis, encouragement, prayer, restoration of hope and finding work and support for those needing it. They propose to build up character and will. Such a movement deserves fair, courteous and deliberate attention.

The general purpose of the American Emmanuel Movement,—for there is one in England, although, apparently, not allied with that of Boston,—would seem to be the adoption in the main of natural methods, *i. e.*, those of Psychotherapy. The introduction to the book, “Religion and Medicine,” the official exposition of the system, tells us that the work began in November, 1906, when Dr. James J. Putnam, Professor in the Harvard Medical School, presided at the preliminary meeting. We further learn that the practice of Emmanuelism,—if that term may be used for brevity,—has been confined “to that large group of maladies which are known to-day as functional nervous disorders,” and that “viewed as an independent remedial agent the legitimate sphere of Psychotherapy is strictly limited. It is in the field of the functional neuroses that all its real victories have been won.” While waiting for an authentic instance of recovery from organic disease through psychical means, and disbelieving, justifiably enough, that any man knows all that is to be known of the subject, the Emmanuelists consider themselves safe in accepting the overwhelming weight of scientific opinion, confining their practice “to a field in which it is known to be efficacious,” and thus avoiding “the one valid objection which has ever been urged against psychotherapeutics, namely, its employment in diseases which obviously require physical interference, with the result that many patients have died through sheer neglect.” Upon the topic under discussion they say: “As to the propriety of the church engaging in such work, we venture to say that the time is come when the church must enter more deeply into the personal lives of the people and make a freer use of the means modern science and the gospel of Christ place at her disposal if she is to continue even to hold her own.” There will probably be no dissent from this statement of Dr. Worcester, the leader of the movement, “What will be the outcome of this movement no man can say.”

Giving to Christian Science what to many will seem more than its due meed of praise, this exposition finds the success of that cult to lie in the following propositions: “No one ever yet accepted a form of religious faith which promised to do him nothing but harm,” and “the more good any particular form of religion accomplishes, the more men will believe it, and the less good any particular church or religious institution does the less the faith it is able to inspire.” By reason of the alleged facts

that Christian Science makes men happy,— it has made some very miserable,—weans them from bad habits, cures disease, removes pain, and concerns itself with present practical and immediate results, this introduction finds Eddyism much superior “to preaching that is vague and impractical, and which deals largely with the distant future.” The hypothesis is also ventured that the offer of a ten-dollar gold piece to each worshipper would fill the pews of Emmanuel regardless of the character of the preaching. That is, no doubt, an ideal condition for the pews to be in. The hypothesis may be sound in a thrifty community; but, after all, it is a speculation. M. Edmond About is said to have won a wager that after dinner he would offer to sell guineas at sixpence on Pall Mall with no takers; and the rector of a great New York church, during the recent panic, found no one, so it is said, to accept his offer to lend money without interest.

Certain articles by Dr. Putnam, who has been already referred to, and by Dr. Richard C. Cabot, appearing in an interesting publication, “Psychotherapy,” which has given much space to the Emmanuel Movement, are particularly interesting both from their substance and the connection of their writers, both of the faculty of the Harvard Medical School, with the Emmanuel Movement. These physicians are more conservative than those who derive their impressions from the press realize. Dr. Cabot defines Psychotherapy or mind cure, as “the attempt to help the sick through mental, moral and spiritual methods,” and he finds its chief characteristics to be the treatment of the entire personality, mental, moral, spiritual and physical, by the co-operation of the physician, minister and social worker; the last being, in many respects, “far more skilled than either the minister or the doctor.” Discrediting the exaggerated statements as to hypnotism, he says: “Psychotherapy is not a cure-all; it is not going to reform all sinners or make artistic or scholarly success issue out of a few hypnotic séances. There is no good reason to suppose that Psychotherapy can by itself reform character or cure organic disease. It may aid in the reconstruction of character, and it can do a great deal toward curing disease of the type known to the physician as functional disease—disease, that is, in which there has been no wide-spread destruction of the organs or tissues of the body such as occurs in organic maladies. . . . Mental treatment does not cure cancer, Bright’s disease, valvular heart disease, consumption

or any of the stubborn long-standing enemies of that type." Again he says: "The majority of persons for whom Psychotherapy is valuable, and for whom it is apt to be attempted, belong to what has been called the 'over-suggestible' class—that is, those who are over-sensitive to the influence of others or of fortune in any form." He distinctly recognizes the danger of psychotherapeutic treatment of this class in "weakening the power of initiative, of weakening the power to paddle one's own canoe, to solve one's own problems with the help of such powers as we can win for ourselves through sober meditation or through prayer." Here may be read between the lines suggestion of a danger to which practising clergymen and their patients may be particularly exposed—namely, that the hysterical in soul may become dependent upon the healer, just as the hysterical sufferer in body relies upon his cane or crutch long after need for it has passed.

Dr. Cabot has been especially quoted because he is one of the Board of Physicians advisory to the Emmanuel clergy, who, recognizing that growing interest in the matter has resulted in such a multitude of calls as to overburden both the clergy and physicians originally concerned, depriving the latter of time in which to treat the cases, have promulgated rules adopted at Emmanuel in order to preserve and extend the co-operation of physician and minister. Those rules, in substance, are that no one shall be received for treatment at Emmanuel except after examination by and approval of a physician; nor referred to any specialist for diagnosis save with his own physician's consent. Under these rules, intended to make it rest wholly with the physician, and not with the clergy, whether patients shall be received at the church for treatment or referred to specialists, the movement is commended by the Advisory Board.*

Prominent physicians in New York have shown similar approval to the allied movement in St. Mark's Church of that city. But it would seem safe to say that medical opinion is by no means universally in favor of Emmanuelism.† Granting that under these strict rules providing for the rigid supervision of its practice by physicians, Emmanuelism would be safe and beneficial, there is a well-grounded fear that it may extend beyond such oversight.

* For the Board's statement of the rules see the "Boston Medical and Surgical Journal," January 21st, 1909.

† See Dr. Allan McLane Hamilton's article in THE NORTH AMERICAN REVIEW, February, 1909.

"This criticism," says Dr. Coriat, one of the collaborators in the book, "Religion and Medicine," "is a valid one, for no greater harm could be done than to place such an important and delicate weapon as that of psychotherapeutics into the hands of untrained and unqualified men." He further says: "I do not believe—in fact, no neurologist believes—that all so-called functional nervous diseases can be treated by psychotherapeutics."* Dr. Putnam, who, as already said, presided at the preliminary meeting, finding himself reported in the lay press unqualifiedly as an advocate of the movement, has made a public statement in which he says: "While I have a high respect for the characters and purposes of its founders, I am convinced that the movement is a mistake. It is clear that clergymen, without adequate preparation, are assuming responsibilities of a kind that physicians are not considered qualified to assume until after years of study and of training. The question is whether the best interests of the community are really being served by this movement, and in my opinion this is not the case."†

In view of the position of Dr. Putnam and others who think as he does, it would seem reasonably clear that the church as an organization cannot wisely give its sanction to this experiment, even though we gladly concede to its leaders all sincerity, ability and high purpose, and recognize fully the advantages of close, sympathetic relation between the pastor and his flock.

In such movements there are dangers to the clergy, however learned or sincere they may be. Zeal for what seems to some—not to all—a new revelation or a rediscovery of the old, will eat many up. Man's nature is to love employment which yields palpable results. Sense of power is exhilarating. Ability to discriminate, observe and co-ordinate results, and to trace them to their causes is rare. The cure of the body is, probably, more fascinating than that of the soul. So absorbed did the spiritual practitioners of medicine during the Middle Ages become in their physical labor that no less than six Church Councils, including that of Tours in 1163, forbade or restricted medical and surgical practice. Errors of diagnosis and prognosis, even by experts, are, and of necessity must be, many and great. Were it not so, court calendars would be purged of many litigations involving personal

* See his letter in the "Boston Herald," of November 22nd, 1908.

† See his letter in the "Boston Herald," of November 20th, 1908.

injuries. The authenticity of reported cures is equally doubtful. When an offer publicly made by the late Mr. Carroll Norton, Mrs. Eddy's publication committee in New York, to demonstrate by proof cures of cancer and locomotor ataxia by Christian Science, was accepted he produced as his "proofs" scrappy typewritten statements of unknown persons in remote parts of the country, such as are furnished abundantly in behalf of every proprietary nostrum, but without the least evidential value to either the trained scientist or the accurate lawyer. Suggestion works in more than one way. Chapter V of "Religion and Medicine" contains sketches by the Rev. Dr. Worcester of those functional neuroses that afford the Emmanuel Movement its victories, namely, neurasthenia, hysteria, psychasthenia, melancholia, hypochondria, chorea and mania. Perusal of them by the impressionable, especially by the young, would, to say the least, do no good. Recognizing the danger of spreading this sort of food before minds unfit to receive it, the sick are wisely advised to skip the chapter, which, therefore, one may presume, will be thumbed more diligently than any other. Bluebeard's caution did not deter Fatima from taking a shivery view of her predecessors. The Emmanuelists' practice is not confined, however, to these neuroses. It extends to other maladies, and to evil habits. Much success is said to have attended experiments by the clergy in putting sufferers from insomnia to sleep. This is in accord with tradition.

At the present moment, the American Emmanuelists are comparatively conservative in their professions. Not so the English Society, in whose report for 1906 it is said: "During the last year, for example, 1,086 treatments have been given to the suffering. The results have been most encouraging. Among the cases successfully treated may be mentioned one of cancer, in which case the specialist called in had given the sufferer only three months to live. By means of the laying on of hands in prayer a complete cure was effected. Again, there are cases of rupture, rheumatoid arthritis, locomotor ataxia, colitis, and numerous cases affecting directly the mental, moral and spiritual nature, in all of which a complete cure was brought about by the same means." This has a strangely familiar sound. The English Emmanuelists evidently think that they have found what the Bostonians are waiting for, authentic cures of organic disease by psychotherapeutic methods. Such cures have been found multitudinously

before—if one is not unduly critical of “proofs.” But, when Mr. Norton produced his “proofs” of the cure of cancer by Christian Science, he was offered five thousand dollars in cash if he would heal a case then under observation and of undoubted diagnosis. He prudently declined the undertaking.

The use of hypnotism in the Emmanuel treatment need not be discussed at length here, nor yet the theory that under hypnotic influence evil suggestion cannot be planted in pure minds. On the latter point authorities disagree; and it has been considered wise in some jurisdictions to confine hypnotic practice to medical men. Moreover, who shall decide what minds are immune? Dr. McComb says that hypnosis is used in only two per cent. of the cases at Emmanuel and under strict medical supervision; that is to say, in “cases of alcoholism and other deep-rooted moral perversions which resist all ordinary methods.”* He resents with warmth Dr. Hamilton’s statement† that he (Dr. McComb) is said to have stated “that ninety per cent. of the people can be hypnotized,” and apparently is of opinion “that nobody outside of a lunatic asylum would ever make this suggestion.” Nevertheless, Dr. Worcester, opposing the theory attributed by him to Charcot’s school, that only the hysterical can be hypnotized, distinctly says: “On the contrary, all experienced practitioners in this field state that between ninety and ninety-five per cent. of all people on whom the experiment has been tried can be influenced hypnotically.”‡ Again Dr. McComb says, with positiveness: “Finally, the clergymen who are at the head of the Emmanuel Movement do not practise medicine. . . . They are not qualified for such work, and therefore do not claim to perform it.” Such an assertion cannot be made dogmatically. What constitutes practice of medicine in criminal prosecutions is a question of fact for a jury, depending largely upon the phraseology of the particular statute of the State wherein the prosecution is conducted. Christian Scientists do not use any therapeutic agents. Apparently the Emmanuelists do, for hypnosis and electricity, not to mention others, are so esteemed. Some statutes class as medical practitioners all persons attempting to heal the sick by any means. Under such a law a Christian Scientist was held to be a prac-

* THE NORTH AMERICAN REVIEW of March, 1909, p. 451.

† THE NORTH AMERICAN REVIEW of February, 1909, p. 230.

‡ “Religion and Medicine,” p. 41.

titioner of medicine and, not being licensed, properly convicted.* Very recently the Supreme Court of New York held that it would not establish a hard and fast rule as to what constitutes medical practice.†

Finally, the Emmanuelists disclaim any purpose of interfering with the religious beliefs of patients. But the mere fact that their treatment is administered by clergymen implies to the ordinary mind that the element of faith or divine interposition is a factor in the cure. It is not entirely clear from their literature to what extent they make faith in Christianity an element in their healing. But, certainly, the average patient who is cured at the church when the physicians have failed will, almost of necessity, infer that the tenets of the practising clergyman are an efficient, if not the efficient, factor in the result.

The sum of the whole matter seems to be that the church should not lend hastily and officially its great authority to the movement in its present stage. This is very far from saying that individual clergymen should not give to their parishioners all the spiritual cheer, comfort and hope of which they are capable in time of sickness, aid them in combating evil habits and render assistance to the poor and needy.

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* *State vs. Buswell*, 40 Neb., 158.

† *People vs. Christian*, 122 App. Div., 842.